



UNITED STATES PATENT AND TRADEMARK OFFICE

COMMISSIONER FOR PATENTS
 UNITED STATES PATENT AND TRADEMARK OFFICE
 WASHINGTON, D.C. 20231
www.uspto.gov



CONFIRMATION NO. 2734

Bib Data Sheet

SERIAL NUMBER 09/763,048	FILING DATE 02/14/2001 RULE	CLASS 455	GROUP ART UNIT 2681	ATTORNEY DOCKET NO. 4070-57PUS
-----------------------------	-----------------------------------	--------------	------------------------	--------------------------------------

APPLICANTS

Andreas Hachenberger, Weixdorf, GERMANY;
 Klaus Jackel, Berlin, GERMANY;
 Mathias Reibe, Dessau, GERMANY;
 Reinhard Schiffel, Schonwalde, GERMANY;
 Joachim Seidel, Berlin, GERMANY;

** CONTINUING DATA *****

THIS APPLICATION IS A 371 OF PCT/EP99/05619 08/03/1999 *gmm*

** FOREIGN APPLICATIONS *****

GERMANY 198 36 888.7 08/14/1998 *gmm*

** SMALL ENTITY **

Foreign Priority claimed	<input checked="" type="checkbox"/> yes <input type="checkbox"/> no	STATE OR COUNTRY	SHEETS DRAWING	TOTAL CLAIMS	INDEPENDENT CLAIMS
35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance	GERMANY	2	10	1
Verified and Acknowledged	<i>C.J. Pontani</i>	Examiner's Signature	Initials		

ADDRESS

Thomas C Pontani
 Cohen Pontani Lieberman & Pavane
 551 Fifth Avenue Suite 1210
 New York , NY 10176

TITLE

Method and device for a full-duplex radio transmission system with code division multiple access

FILING FEE RECEIVED 430	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees
		<input type="checkbox"/> 1.16 Fees (Filing)
		<input type="checkbox"/> 1.17 Fees (Processing Ext. of time)
		<input type="checkbox"/> 1.18 Fees (Issue)
		<input type="checkbox"/> Other _____
		<input type="checkbox"/> Credit

DO/EO BIBLIOGRAPHIC DATA ENTRY

SERIAL NUMBER: 09 / 763048 RECEIPT DATE: 02 / 14 / 01
IA NUMBER: PCT/ EP99 / 05619 IA FILING DATE: 08 / 03 / 99
FAMILY NAME: HACHENBERGER DELAY WAIVED (Y/N): Y
GIVEN NAME: ANDREAS DEMAND RECEIVED (Y/N): Y
PRIORITY CLAIMED (Y/N): Y PRIORITY DATE: 08 / 14 / 98
NO BASIC FEE (Y/N): N US DESIGNATED ONLY (Y/N): N
ATTORNEY DOCKET NUMBER: 4070-57PUS COUNTRY:
CORRESPONDENCE NAME/ADDRESS: CUSTOMER NUMBER: 000000 TELEPHONE 0000000000
FAX

NAME: KLAUS P STOFFEL

STREET: 551 FIFTH AVENUE SUITE 1210

CITY: NEW YORK

STATE/COUNTRY: NY ZIP: 10176

EMAIL:

APPLICATION TITLES:

METHOD AND DEVICE FOR FULL-DUPLEX RADIO TRANSMISSION SYSTEM WITH CODE
DIVISION MULTIPLE ACCESS

TAB TO LAST POSITION, PUSH SEND